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UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA

CHAPTER 13 PLAN AND RELATED MOTIONS

Case No. 15-34564-KI P

ivanic of Debior(s)). Jasquemie i verme dankeen	Case 110.	
Γhis plan, dated S e	eptember 8, 2015 , is:		
■	the <i>first</i> Chapter 13 plan filed in this case. a modified Plan, which replaces the □confirmed or □unconfirmed Plan dated.		
	Date and Time of Modified Plan Confirming Hearing:		
	Place of Modified Plan Confirmation Hearing:		
The	Plan provisions modified by this filing are:		
Cred	litors affected by this modification are:		

Jacqueline Yvonne Jackson

NOTICE: YOUR RIGHTS WILL BE AFFECTED. You should read these papers carefully. If you oppose any provision of this Plan, or if you oppose any included motions to (i) value collateral, (ii) avoid liens, or (iii) assume or reject unexpired leases or executory contracts, you MUST file a timely written objection.

This Plan may be confirmed and become binding, and the included motions in paragraphs 3, 6, and 7 to value collateral, avoid liens, and assume or reject unexpired leases or executory contracts may be granted, without further notice or hearing unless a written objection is filed not later than seven (7) days prior to the date set for the confirmation hearing and the objecting party appears at the confirmation hearing. If no objections are timely filed, a confirmation hearing will NOT be held.

The debtor(s)' schedules list assets and liabilities as follows:

Total Assets: \$66,376.00

Total Non-Priority Unsecured Debt: \$16,668.00

Total Priority Debt: **\$1,862.00** Total Secured Debt: **\$3,000.00**

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- **1. Funding of Plan.** The debtor(s) propose to pay the trustee the sum of \$505.00 Monthly for 60 months. Other payments to the Trustee are as follows: NONE . The total amount to be paid into the plan is \$ 30,300.00 .
- 2. **Priority Creditors.** The Trustee shall pay allowed priority claims in full unless the creditor agrees otherwise.
 - A. Administrative Claims under 11 U.S.C. § 1326.
 - 1. The Trustee will be paid the percentage fee fixed under 28 U.S.C. § 586(e), not to exceed 10%, of all sums disbursed except for funds returned to the debtor(s).
 - 2. Debtor(s)' attorney will be paid \$_4,750.00 balance due of the total fee of \$_5,050.00 concurrently with or prior to the payments to remaining creditors.
 - B. Claims under 11 U.S.C. §507.

The following priority creditors will be paid by deferred cash payments pro rata with other priority creditors or in monthly installments as below, except that allowed claims pursuant to 11 U.S.C. § 507(a)(1) will be paid prior to other priority creditors but concurrently with administrative claims above:

CreditorType of PriorityEstimated ClaimPayment and TermCity of Richmond - TAXTaxes and certain other debts1,862.00Prorata6 months

- 3. Secured Creditors: Motions to Value Collateral ("Cramdown"), Collateral being Surrendered, Adequate Protection Payments, and Payment of certain Secured Claims.
 - A. Motions to Value Collateral (other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) or by the final paragraph of 11 U.S.C. § 1325(a)). Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion to value collateral as set forth herein.

This section deals with valuation of certain claims secured by real and/or personal property, other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) [real estate which is debtor(s)' principal residence] or by the final paragraph of 11 U.S.C. § 1325(a) [motor vehicles purchased within 910 days or any other thing of value purchased within 1 year before filing bankruptcy], in which the replacement value is asserted to be less than the amount owing on the debt. Such debts will be treated as secured claims only to the extent of the replacement value of the collateral. That value will be paid with interest as provided in sub-section D of this section. You must refer to section 3(D) below to determine the interest rate, monthly payment and estimated term of repayment of any "crammed down" loan. The deficiency balance owed on such a loan will be treated as an unsecured claim to be paid only to the extent provided in section 4 of the Plan. The following secured claims are to be "crammed down" to the following values:

CreditorCollateralPurchase DateEst Debt Bal.Replacement ValueAmerican Honda2008 Honda Accord LX with 93k Miles04/18/20083,000.0010,550.00

B. Real or Personal Property to be Surrendered.

Upon confirmation of the Plan, or before, the debtor(s) will surrender his/her/their interest in the collateral securing the claims of the following creditors in satisfaction of the secured portion of such creditors' allowed claims. To the extent that the collateral does not satisfy the claim, any timely filed deficiency claim to which the creditor is entitled may be paid as a non-priority unsecured claim. Confirmation of the Plan shall terminate the automatic stay as to the interest of the debtor(s) and the estate in the collateral.

<u>Creditor</u> <u>Collateral Description</u> <u>Estimated Value</u> <u>Estimated Total Claim</u>

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C. Adequate Protection Payments.

The debtor(s) propose to make adequate protection payments required by 11 U.S.C. § 1326(a) or otherwise upon claims secured by personal property, until the commencement of payments provided for in sections 3(D) and/or 6(B) of the Plan, as follows:

 Creditor
 Collateral Description
 Adeq. Protection
 To Be Paid By

 American Honda Finance
 2008 Honda Accord LX with 93k Miles
 11.00
 Trustee

Any adequate protection payment upon an unexpired lease of personal property assumed by the debtor(s) pursuant to section 6(B) of the Plan shall be made by the debtor(s) as required by 11 U.S.C. § 1326(a)(1)(B) (payments coming due after the order for relief).

D. Payment of Secured Claims on Property Being Retained (except only those loans provided for in section 5 of the Plan):

This section deals with payment of debts secured by real and/or personal property [including short term obligations, judgments, tax liens and other secured debts]. After confirmation of the Plan, the Trustee will pay to the holder of each allowed secured claim, which will be either the balance owed on the indebtedness or, where applicable, the collateral's replacement value as specified in sub-section A of this section, whichever is less, with interest at the rate provided below, the monthly payment specified below until the amount of the secured claim has been paid in full. Upon confirmation of the Plan, the valuation and interest rate shown below will be binding unless a timely written objection to confirmation is filed with and sustained by the Court.

Creditor	<u>Collateral</u>	Approx. Bal. of Debt or "Crammed Down" Value	Interest Rate	Monthly Paymt & Est. Term**
American Honda Finance	2008 Honda Accord LX with 93k Miles	3,000.00	4.25%	130.61 24 months

E. Other Debts.

Debts which are (i) mortgage loans secured by real estate which is the debtor(s)' primary residence, or (ii) other long term obligations, whether secured or unsecured, to be continued upon the existing contract terms with any existing default in payments to be cured pursuant to 11 U.S.C. § 1322(b)(5), are provided for in section 5 of the Plan.

4. Unsecured Claims.

- B. Separately classified unsecured claims.

Creditor	Basis for Classification	Treatment
-NONE-		

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5.	Mortgage Loans Secured by Real Property Constituting the Debtor(s)' Primary Residence; Other Long Term
	Payment Obligations, whether secured or unsecured, to be continued upon existing contract terms; Curing of any
	existing default under 11 U.S.C. § 1322(b)(5).

A. Debtor(s) to make regular contract payments; arrears, if any, to be paid by Trustee. The creditors listed below will be paid by the debtor(s) pursuant to the contract without modification, except that arrearages, if any, will be paid by the Trustee either pro rata with other secured claims or on a fixed monthly basis as indicated below, without

	interest unless an interest rate is designated provided for in the loan agreement.					
Creditor -NONE-	<u>Collateral</u>	Regular Contract <u>Payment</u>	Estimated Arrearage	Arrearage Interest <u>Rate</u>	Estimated Cure Period	Monthly Arrearage <u>Payment</u>
В.	Trustee to make contract payments and regular contract monthly payments that condebts shall be cured by the Trustee either pelow.	me due during the peri	od of this Plan	, and pre-p	etition arrearag	ges on such
Creditor -NONE-	<u>Collateral</u>	Regular Contract <u>Payment</u>	Estimated Arrearage	Interest Rate	Term for Arrearage	Monthly Arrearage <u>Payment</u>
C.	Restructured Mortgage Loans to be pair constituting the debtor(s)' principal resider payment under the Plan is due shall be pair 1322(c)(2) with interest at the rate specifie	nce upon which the last d by the Trustee during	t scheduled co	ntract payn	nent is due befo	ore the final
<u>Creditor</u> -NONE-	<u>Collateral</u>	Interest <u>Rate</u>	Estimate Claim		hly Paymt& Es	st. Term**
_	pired Leases and Executory Contracts. The listed below.	debtor(s) move for as	sumption or re	ejection of t	he executory co	ontracts and

- 6 ıd
 - A. **Executory contracts and unexpired leases to be rejected.** The debtor(s) reject the following executory contracts.

Creditor -NONE-

Type of Contract

В. Executory contracts and unexpired leases to be assumed. The debtor(s) assume the following executory contracts. The debtor agrees to abide by all terms of the agreement. The Trustee will pay the pre-petition arrearages, if any, through payments made pro rata with other priority claims or on a fixed monthly basis as indicated below.

Monthly Estimated Payment Type of Contract Creditor Cure Period Arrearage for Arrears -NONE-

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- 7. Liens Which Debtor(s) Seek to Avoid.
 - A. The debtor(s) move to avoid liens pursuant to 11 U.S.C. § 522(f). The debtor(s) move to avoid the following judicial liens and non-possessory, non-purchase money liens that impair the debtor(s)' exemptions. Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion and cancel the creditor's lien. If an objection is filed, the Court will hear evidence and rule on the motion at the confirmation hearing.

<u>Creditor</u> <u>Collateral</u> <u>Exemption Amount</u> <u>Value of Collateral</u>

B. Avoidance of security interests or liens on grounds other than 11 U.S.C. § 522(f). The debtor(s) have filed or will file and serve separate pleadings to avoid the following liens or security interests. The creditor should review the notice or summons accompanying such pleadings as to the requirements for opposing such relief. The listing here is for information purposes only.

<u>Creditor</u> <u>Type of Lien</u> <u>Description of Collateral</u> <u>Basis for Avoidance</u> -NONE-

- 8. Treatment and Payment of Claims.
 - All creditors must timely file a proof of claim to receive payment from the Trustee.
 - If a claim is scheduled as unsecured and the creditor files a claim alleging the claim is secured but does not timely object to confirmation of the Plan, the creditor may be treated as unsecured for purposes of distribution under the Plan. This paragraph does not limit the right of the creditor to enforce its lien, to the extent not avoided or provided for in this case, after the debtor(s) receive a discharge.
 - If a claim is listed in the plan as secured and the creditor files a proof of claim alleging the claim is unsecured, the creditor will be treated as unsecured for purposes of distribution under the Plan.
 - The Trustee may adjust the monthly disbursement amount as needed to pay an allowed secured claim in full.
- **9. Vesting of Property of the Estate.** Property of the estate shall revest in the debtor(s) upon confirmation of the Plan. Notwithstanding such vesting, the debtor(s) may not sell, refinance, encumber real property or enter into a mortgage loan modification without approval of the Court after notice to the Trustee, any creditor who has filed a request for notice and other creditors to the extent required by the Local Rules of this Court.
- 10. Incurrence of indebtedness. The debtor(s) shall not voluntarily incur additional indebtedness exceeding the cumulative total of \$5,000 principal amount during the term of this Plan, either unsecured or secured against personal property, except upon approval of the Court after notice to the Trustee, any creditor who has filed a request for notice, and other creditors to the extent required by the Local Rules of this Court.
- 11. Other provisions of this plan:
 - I. Payment of Adequate Protection
 - All adequate protection payments set forth in Section 3.C are to be paid through the Trustee.
 - The Debtor(s) shall pay regular post-petition contract payments to the creditors listed in Section 5.A., and such payments shall also constitute adequate protection payments to such creditors. Accordingly, the Trustee shall not pay adequate protection payments to creditors listed in Section 5.A.
 - No adequate protection payments are to be paid to any creditors unless the Plan provides for the payment of adequate protection of such claim(s) through the Trustee in Section 3.C. or directly by the Debtor(s) in Section 5.A., or unless the Court orders otherwise.
 - II. Notwithstanding the confirmation of this plan the debtor(s) reserve the right to challenge the allowance, validity, or enforceability of any claim in accordance with § 502(b) and to challenge the standing of any party to assert any such claim.

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Signatures:		
Dated: Sept	ember 8, 2015	-
/s/ Jacqueline Yvo Debtor	Yvonne Jackson onne Jackson	/s/ Laura T. Alridge VSB Laura T. Alridge VSB 42549 Debtor's Attorney
Exhibits:	Copy of Debtor(s)' Budget (Schedules Matrix of Parties Served with Plan	I and J);
I certify that on _ Service List.	_	Certificate of Service of the foregoing to the creditors and parties in interest on the attached
		Alridge VSB ridge VSB 42549
	P. O. Box 1 ^o Richmond, Address	1588 VA 23230-1588
	804-358-990 Telephone N	-

Ver. 09/17/09 [effective 12/01/09]

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Debtor 1 Jacqueline Yvonne Jackson Debtor 2 (Spouse, if thing) United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA Case number 15-34564-KLP Official Form B 6I Schedule I: Your Income B as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally resumplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information as spouse. If you are esparated and your spouse is not filling with you, do not include information about your spouse. If more spaat attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer of the following. 1. Fill in your employment information. If you have more than one job, attach a separate page with information. If you have more than one job, attach a separate page with information. If you have more than one job, attach a separate page with information. If you have more than one job, attach a separate page with information. Cocupation may include student or homemaker, if it applies. Employer's andress Mailstop: R382-310 1303 Ridgeview Lewisville, TX 75057 How long employed there? Since 02/02/2004 Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include yo spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines beld more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 For Debtor 1 For Debtor 2 For Debtor 3 For Debtor 3 For Debtor 3 For Debtor 4 For Debtor 5 For Debtor 6 For Debtor 7 For Debtor 9 For Debtor 9 For Debtor 9 For Debtor 1 For Debtor 9 For Debto	
United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA Case number 15-34564-KLP An amended filing A supplement showing post-pt 13 income as of the following. An amended filing An applement showing post-pt 13 income as of the following. An amended filing An a	
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Official Form B 6I Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally ressupplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more spatatach a separate and your spouse is not filing with you, do not include information about your spouse. If more spatatach a separate beet to this form. On the top of any additional pages, write your name and case number (if known). Answer of the top of any additional pages, write your name and case number (if known). Answer of the top of any additional pages, write your name and case number (if known). Answer of the top of any additional pages, write your name and case number (if known). Answer of the top of any additional pages, write your name and case number (if known). Answer of the top of any additional pages, write your name and case number (if known). Answer of the top of any additional pages, write your name and case number (if known). Answer of the top of any additional pages, write your name and case number (if known). Answer of the top of any additional pages, write your name and case number (if known). Answer of the top of any additional pages, write your name and case number (if known). Answer of the top of any additional pages, write your name and case number (if known). Answer of the top of any additional pages, write your name and case number (if known). Answer of the top of any additional pages, write your name and case number (if known). Answer of the top of any additional pages, write your name and case number (if known). Answer of the top of any additional pages, write your name and case number (if known). Answer of the top of any additional pages, write your name and case number (if known). Answer of the page of the top of any additional pages, write your name and case number (if known). Answer of the page of the top of any additional pages, write your name and ca	
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Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally resuspiplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information as spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more spaatatach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer of the provided in the provi	
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Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address or homemaker, if it applies or homemaker, if	
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more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filling spou	our non-filing
List monthly gross wages, salary, and commissions (before all payroll	low. If you need
	N/A
3. Estimate and list monthly overtime pay. 3. +\$	N/A
4. Calculate gross Income. Add line 2 + line 3. 4. \$\ \[\\$ \ \ \] \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u>/A</u>

Official Form B 6I Schedule I: Your Income page 1

Debt	or 1	Jacqueline Yvonne Jackson	_	Case r	number (if known)	15-34564	·KLP	
				For	Debtor 1	For Debto		
	Сор	y line 4 here	4.	\$	2,274.96	non-filing	N/A	
_								•
5.	_	all payroll deductions:	_	•	444.00	•		
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$ \$	444.23 0.00	\$ \$	N/A N/A	=
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	-
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	-
	5e.	Insurance	5e.	\$	0.00	\$	N/A	- -
	5f.	Domestic support obligations	5f.	\$ \$	0.00	\$ \$	N/A	-
	5g. 5h.	Union dues Other deductions. Specify: Deductions	5g. 5h.+	- :	0.00 176.58	+ \$	N/A N/A	-
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ \$	620.81	\$	N/A	=
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 		\$	N/A	-
		* * *	7.	Ψ	1,654.15	Ψ	IN/A	=
8.	8a.	all other income regularly received: Net income from rental property and from operating a business,						
		profession, or farm						
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	nt					
		Include alimony, spousal support, child support, maintenance, divorce						
		settlement, and property settlement.	8c.	\$	0.00	\$	N/A	-
	8d.	Unemployment compensation	8d.	\$	0.00	\$ \$	N/A	-
	8e. 8f.	Social Security Other government assistance that you regularly receive	8e.	\$ <u></u>	0.00	Φ	N/A	•
	01.	Include cash assistance and the value (if known) of any non-cash assistan	ice					
		that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
		Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	587.00	\$	N/A	
	O.L.	Amortized Federal & State Tax	Ol-	•	83.33	. •	N/A	
	8h.	Other monthly income. Specify: Refund	8h.+	\$ <u></u>	65.55	+ \$	IN/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	670.33	\$	N/A	\
								<u> </u>
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$	2	2,324.48 + \$	N/A	A = \$	2,324.48
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.		e all other regular contributions to the expenses that you list in Schedu						
		de contributions from an unmarried partner, members of your household, yor friends or relatives.	ur depen	dents,	your roommate	s, and		
		not include any amounts already included in lines 2-10 or amounts that are no	ot availab	le to p	ay expenses lis	ted in <i>Sch</i> ea	lule J.	
	Spec	cify:				11	. +\$	0.00
12.	Add	the amount in the last column of line 10 to the amount in line 11. The	esult is t	ne con	nbined monthly	income		
	Write	e that amount on the Summary of Schedules and Statistical Summary of Cer				ta, if it	Φ.	2,324.48
	appli	ies				12	. 5	2,324.40
							Combin	
13.	Do v	ou expect an increase or decrease within the year after you file this for	m?				monthl	y income
	,	No.	= =					
		Yes. Explain:						

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Fill	I in this information to identify your case:			
Deb	btor 1 Jacqueline Yvonne Jackson	C	heck if this is:	
			An amended filing	
	btor 2		A supplement shown 13 expenses as of	wing post-petition chapter
(Sp	pouse, if filing)		rs expenses as or	the following date:
Unit	ited States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA		MM / DD / YYYY	
Cas	se number 15-34564-KLP		A separate filing for	r Debtor 2 because Debtor
(If k	known)		2 maintains a sepa	arate household
O.	Official Form B 6J			
	chedule J: Your Expenses			12/13
Be info	e as complete and accurate as possible. If two married people are file formation. If more space is needed, attach another sheet to this forr			
nur	mber (if known). Answer every question.			
Par	rt 1: Describe Your Household			
1.	Is this a joint case?			
	■ No. Go to line 2.			
	☐ Yes. Does Debtor 2 live in a separate household?			
	□No			
	☐ Yes. Debtor 2 must file a separate Schedule J.			
2.	Do you have dependents? ■ No			
		Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	Do not state the			□ No
	dependents' names.			☐ Yes
				□ No
	_			☐ Yes
				□ No
	_			☐ Yes ☐ No
				☐ Yes
3.	Do your expenses include ■ No			1 103
	expenses of people other than			
	yourself and your dependents?			
	rt 2: Estimate Your Ongoing Monthly Expenses			
exp	stimate your expenses as of your bankruptcy filing date unless you a penses as of a date after the bankruptcy is filed. If this is a supplem			
app	plicable date.			
Inc	clude expenses paid for with non-cash government assistance if yo e value of such assistance and have included it on <i>Schedule I: You</i>	u know r Income		
	fficial Form 6I.)		Your exp	enses
4.	The rental or home ownership expenses for your residence. Inclupayments and any rent for the ground or lot.	ide first mortgage 4.	\$	0.00
	If not included in line 4:			
	4a. Real estate taxes	4a.	\$	58.33
	4b. Property, homeowner's, or renter's insurance	4b.	\$	229.00
	4c. Home maintenance, repair, and upkeep expenses		\$	0.00
5.	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as home	4d. equity loans 5.		0.00
· .				

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Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Security Alarm System and housekeeping supplies leare and children's education costs sing, laundry, and dry cleaning onal care products and services cal and dental expenses sportation. Include gas, maintenance, bus or train fare. Intelude car payments. Itainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations ance. It include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: S. Do not include taxes deducted from your pay or included in lines 4 or 20. Ify: Personal Property	6a. 6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	195.00 230.00 46.00 32.00 280.00 0.00 25.00 45.00 25.00 225.00 50.00 28.00
Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Security Alarm System and housekeeping supplies care and children's education costs sing, laundry, and dry cleaning onal care products and services cal and dental expenses sportation. Include gas, maintenance, bus or train fare. ot include car payments. rtainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations ance. ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ffy: Personal Property	6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	230.00 46.00 32.00 280.00 0.00 25.00 45.00 25.00 225.00 50.00 28.00
Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Security Alarm System and housekeeping supplies care and children's education costs sing, laundry, and dry cleaning onal care products and services cal and dental expenses sportation. Include gas, maintenance, bus or train fare. ot include car payments. rtainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations ance. ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ffy: Personal Property	6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	230.00 46.00 32.00 280.00 0.00 25.00 45.00 25.00 225.00 50.00 28.00
Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Security Alarm System and housekeeping supplies care and children's education costs sing, laundry, and dry cleaning onal care products and services cal and dental expenses sportation. Include gas, maintenance, bus or train fare. ot include car payments. rtainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations ance. ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ffy: Personal Property	6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	46.00 32.00 280.00 0.00 25.00 45.00 25.00 225.00 50.00 28.00
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and housekeeping supplies care and children's education costs sing, laundry, and dry cleaning conal care products and services cal and dental expenses sportation. Include gas, maintenance, bus or train fare. ot include car payments. rtainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations ance. ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. fy: Personal Property	7. 8. 9. 10. 11. 12. 13. 14.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	280.00 0.00 25.00 45.00 25.00 225.00 50.00 28.00
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conal care products and services cal and dental expenses sportation. Include gas, maintenance, bus or train fare. of include car payments. retainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations ance. of include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. fy: Personal Property	10. 11. 12. 13. 14. 15a. 15b. 15c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	45.00 25.00 225.00 50.00 28.00 87.00 0.00
cal and dental expenses sportation. Include gas, maintenance, bus or train fare. bt include car payments. rtainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations ance. bt include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. fy: Personal Property	11. 12. 13. 14. 15a. 15b. 15c.	\$	25.00 225.00 50.00 28.00 87.00 0.00
sportation. Include gas, maintenance, bus or train fare. Include car payments. Intainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations ance. In the include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Solution Do not include taxes deducted from your pay or included in lines 4 or 20. If your payor included in lines 4 or 20. If your payor included in lines 4 or 20. If your payor included in lines 4 or 20. If your payor included in lines 4 or 20.	12. 13. 14. 15a. 15b. 15c.	\$	225.00 50.00 28.00 87.00 0.00
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itable contributions and religious donations ance. It include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: S. Do not include taxes deducted from your pay or included in lines 4 or 20. Ify: Personal Property	14. 15a. 15b. 15c.	\$	28.00 87.00 0.00
tinclude insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. fy: Personal Property	15a. 15b. 15c.	\$ \$ \$	87.00 0.00
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Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. fy: Personal Property	15b. 15c.	\$ \$	0.00
Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. fy: Personal Property	15c.	\$	0.00
Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Personal Property		·	
Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Personal Property		·	
s. Do not include taxes deducted from your pay or included in lines 4 or 20. fy: Personal Property		\$	0.00
fy: Personal Property		•	0.00
	16.	\$	58.33
Car payments for Vehicle 1	17a.	\$	0.00
Car payments for Vehicle 2	17b.	\$	0.00
Other. Specify:	17c.	\$	0.00
	17d.	\$	0.00
payments of alimony, maintenance, and support that you did not repor	t as		
cted from your pay on line 5, Schedule I, Your Income (Official Form 6I)) . 18.	\$	0.00
r payments you make to support others who do not live with you.		\$	0.00
	19.		
Mortgages on other property		·	0.00
Real estate taxes	20b.	\$	0.00
		·	0.00
Maintenance, repair, and upkeep expenses		·	0.00
Homeowner's association or condominium dues	20e.	\$	0.00
r: Specify: Miscellaneous Expenses	21.	+\$	100.00
monthly expenses. Add lines 4 through 24	22	¢	4.040.00
• •	22.	э	1,818.66
•	220	¢	0 204 40
1,5			2,324.48
Copy your monthly expenses from line 22 above.	23b.	- \$	1,818.66
Subtract your monthly expenses from your monthly income			
	23c.	\$	505.82
	Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not reported from your pay on line 5, Schedule I, Your Income (Official Form 6I) repayments you make to support others who do not live with you. Ify: Ify: If real property expenses not included in lines 4 or 5 of this form or on a Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues If the specific service of the	Other. Specify: 17c. Other. Specify: 17d. 17d. 17d. payments of alimony, maintenance, and support that you did not report as cted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 18. r payments you make to support others who do not live with you. If y: 19. r real property expenses not included in lines 4 or 5 of this form or on Schedule I: You Mortgages on other property 20a. Real estate taxes 20b. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses 20d. Homeowner's association or condominium dues 20e. r: Specify: Miscellaneous Expenses 21. monthly expenses. Add lines 4 through 21. 22. esult is your monthly expenses. 21. Copy line 12 (your combined monthly income) from Schedule I. 23a. Copy your monthly expenses from line 22 above. 23b. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. ou expect an increase or decrease in your expenses within the year after you file this ample, do you expect to finish paying for your car loan within the year or do you expect your mortgage pacation to the terms of your mortgage?	Other. Specify: 17c. \$ Other. Specify: 17d. \$ payments of alimony, maintenance, and support that you did not report as cted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 18. \$ r payments you make to support others who do not live with you. \$ 19.

Office of the US Trustee 701 E. Broad Street Room 4304 Richmond, VA 23219

American Honda Finance 8601 McAlpine Park Drive Charlotte, NC 28211

Bon Secours Health System 1505 Marriottsville Road Marriottsville, MD 21104

Capital One PO Box 71083 Charlotte, NC 28272-1083

Cardiovascular Assoc of VA P.O. Box 843356 Boston, MA 02284

City of Richmond - TAX City Hall 900 E. Broad Street, Room 100 Richmond, VA 23219

City of Richmond - Utilities 730 E. Broad Street, Rm 102 Richmond, VA 23219

CJW Medical Center PO Box 13620 Richmond, VA 23225

Comcast Attn: Bankruptcy Dept PO Box 3012 Southeastern, PA 19398-3012

Commonwealth Anesthesia Assoc. Attn: Bankruptcy Dept. PO Box 35808 Richmond, VA 23235 Commonwealth Lab Consultants Attn: Bankruptcy Dept. 1401 Johnston Willis Dr Richmond, VA 23235-4730

Commonwealth Radiology Re: Bankrutpcy 1508 Willow Lawn Dr, Ste 117 Richmond, VA 23230

contract callers Inc. P.O. Box 212609 1058 Claussen Road, Ste. 110 Augusta, GA 30917

Dominion VA Power Attn: Bankruptcy Group P.O. Box 26666 Richmond, VA 23261

Family Mobile PO Box 629026 El Dorado Hills, CA 95762

Frank D. Bruni, DDS ☐9220 Forest Hill Ave Richmond, VA 23235

Inpatient Medical Services PA PO Box 41367 Houston, TX 77240

Labcorp Re: Bankruptcy Dept. PO Box 2240 Burlington, NC 27216

LCA Collections
Re: LabCorp
1250 Chapel Hill Road
Burlington, NC 27215

Lendmark 7526 W. Broad Street Richmond, VA 23294 Neurological Associates, Inc. 7301 Forest Avenue Suite 300 Richmond, VA 23226

One Main Financial 2710 Enterprise Parkway Henrico, VA 23294

Parrish and Lebar Re: 5 East Franklin Street Richmond, VA 23219

Patient First Attn: Patient Accounts 5000 Cox Road, Suite 100 Glen Allen, VA 23060

Patterson Avenue Family Practi 7229 Forest Avenue Suite 110 Richmond, VA 23226

Receivables Management Re: Patient First 7206 Hull Street Rd, Ste 211 Richmond, VA 23235

Richmond Emergency Physicians PO Box 79013 Baltimore, MD 21279-0013

University of Virginia Health Legal Collection Unit P. O. Box 3883 Charlottesville, VA 22903

Urosurgical Center Attn: Bankruptcy Dept. 9105 Stony Point Drive Richmond, VA 23235-1979 Virginia Eye Institute Attn: Bankruptcy Dept 400 Westhampton Station Richmond, VA 23226